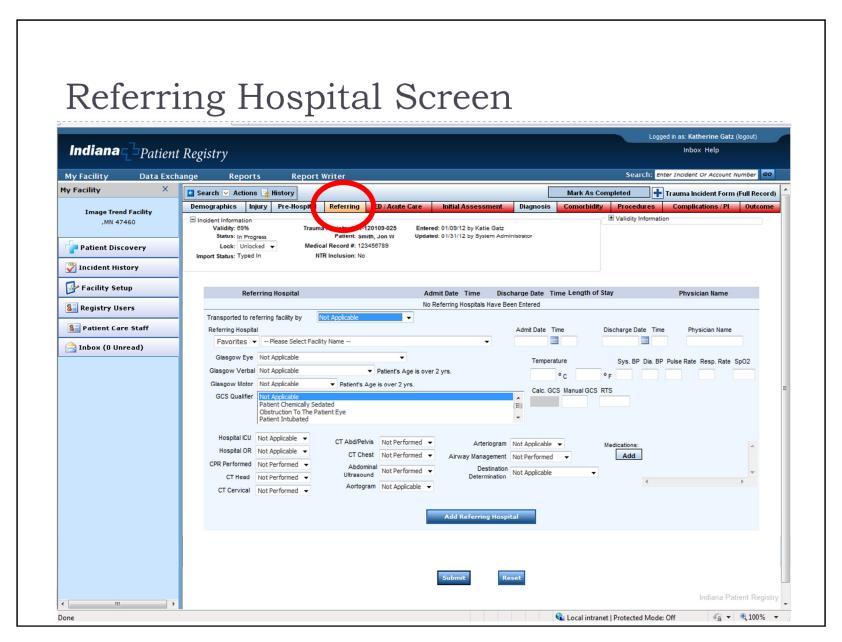


This tab is used to capture anything regarding the referring facility, including vital signs and the results of tests.



You know you are on the "Referring" tab when the tab is highlighted. The information on the screen should be the same as what you see here.

Referring Hospital Screen-Transported to Referring Facility By Logged in as: Katherine Gatz (logout Indiana Patient Registry Inbox Help Search: Enter Incident Or Account Number My Facility Reports **Report Writer** My Facility Search ✓ Actions History Mark As Completed Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Diagnosis Comorbidity Procedures Complications / PI Outcome **Image Trend Facility** ■ Validity Information ,MN 47460 Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Validity: 69% Status: In Progress Patient: Smith, Jon W Updated: 01/31/12 by System Administrator Lock: Unlocked ▼ Medical Record #: 123456789 Patient Discovery Import Status: Typed In NTR Inclusion: No Incident History 好 Facility Setup Admit Date Time Discharge Date Time Length of Stay No Referring Hospitals Have Been Entered & Registry Users Sample Patient Care Staff Referring Hospital Admit Date Time Physician Name 🗎 Inbox (0 Unread) Glasgow Eye Not Applicable Sys. BP Dia. BP Pulse Rate Resp. Rate Sp02 Glasgow Verbal Not Applicable ▼ Patient's Age is over 2 vrs. Glasgow Motor Not Applicable ▼ Patient's Age is over 2 yrs. Calc GCS Manual GCS RTS GCS Qualifier Patient Chemically Sedated Obstruction To The Patient Eve Patient Intubated Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable 🕶 Medications: Hospital OR Not Applicable ▼ CT Chest Not Performed ▼ Add Airway Management Not Performed ▼ CPR Performed Not Performed ▼ Abdominal Not Performed ▼ Destination Not Applicable Ultrasound CT Head Not Performed ▼ Aortogram Not Applicable -CT Cervical Not Performed ▼ Add Referring Hospital Indiana Patient Registry Cal Intranet | Protected Mode: Off √a ▼ □ 100% ▼

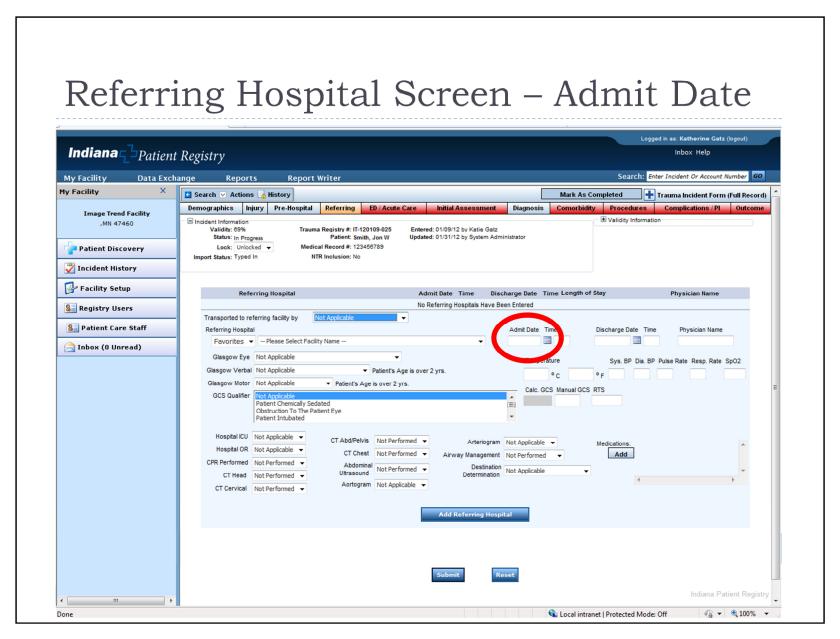
The "Transported to referring facility by" element is the mode of transport delivering the patient to the referring hospital. Select an option from the drop-down menu.

Referring Hospital Screen – Referring Hospital Name Patient Registry Indianac My Facility Reports Report Writer Search: Enter Incident Or Account Number My Facility Search ✓ Actions History Mark As Completed Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Comorbidity Procedures **Image Trend Facility ★** Validity Information MN 47460 Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Status: In Progress Patient: Smith, Jon W Updated: 01/31/12 by System Administrator Medical Record #: 123456789 Lock: Unlocked -Patient Discovery NTR Inclusion: No Incident History 好 Facility Setup Discharge Date Time Length of Stay No Referring Hospitals Have Been Entered 🚰 Registry Users Not Applicable 8 Patient Care Staff Referring Hospital Admit Date Time Discharge Date Time 🗎 Inbox (0 Unread) ▼ Patient's Age is over 2 yrs. ▼ Patient's Age is over 2 vrs. Calc. GCS Manual GCS RTS Patient Chemically Sedated Obstruction To The Patient Eve Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable ▼ Hospital OR Not Applicable ▼ CT Chest Not Performed ▼ Airway Management Not Performed CPR Performed Not Performed ▼ Abdominal Not Performed ▼ Destination Not Applicable Ultrasound CT Head Not Performed → Determination Aortogram Not Applicable ▼ CT Cervical Not Performed -Local intranet | Protected Mode: Off √a ▼ € 100% ▼

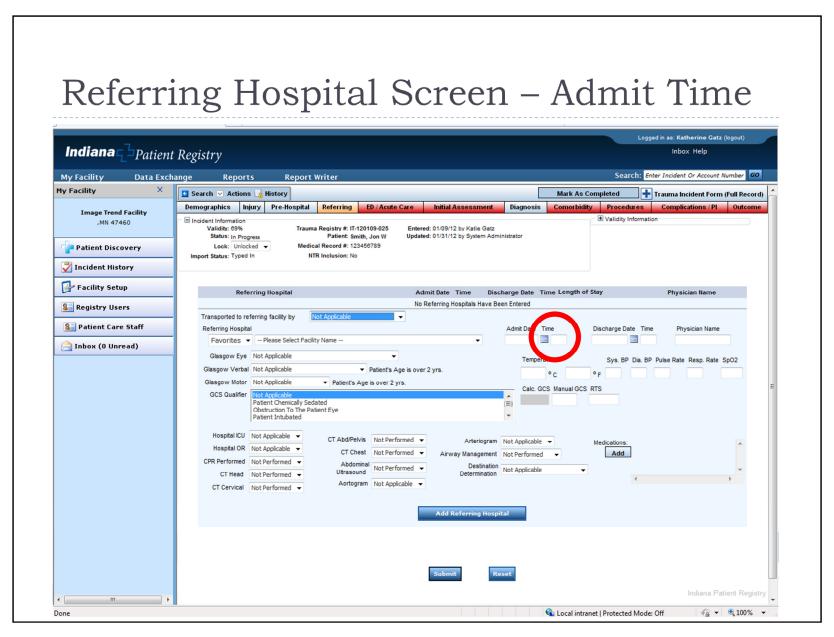
It is highly recommended to set up several Favorite Referring Hospitals to quickly fill in the Referring Hospital Name. If you already have hospital names set up, you can click on the drop-down menu to select the state in which the Referring Hospital is located.

Referring Hospital Screen – Referring Hospital Name (2) Logged in as: Katherine Gatz (logout Indiana Patient Registry Inbox Help Search: Enter Incident Or Account Number My Facility Reports **Report Writer** My Facility Search ✓ Actions History Mark As Completed Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Diagnosis Comorbidity Procedures Complications / PI Outcome **Image Trend Facility** ■ Validity Information ,MN 47460 Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Validity: 69% Status: In Progress Patient: Smith, Jon W Updated: 01/31/12 by System Administrator Lock: Unlocked ▼ Medical Record #: 123456789 Patient Discovery Import Status: Typed In NTR Inclusion: No Incident History 好 Facility Setup Referring Hospital Admit Date Time Discharge Date Time Length of Stay No Referring Hospitals Have Been Entered & Registry Users Sample Patient Care Staff Referring Hospital Admit Date Time Discharge Date Time Physician Name Favorites - - Please Select Facility Name -🗎 Inbox (0 Unread) Temperature Sys. BP Dia. BP Pulse Rate Resp. Rate SpO2 Glasgow Verbal Not Applicable ▼ Patient's Age is over 2 yrs. Glasgow Motor Not Applicable ▼ Patient's Age is over 2 yrs. Calc GCS Manual GCS RTS GCS Qualifier Patient Chemically Sedated Obstruction To The Patient Eve Patient Intubated Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable + Medications: Hospital OR Not Applicable ▼ CT Chest Not Performed ▼ Add Airway Management Not Performed ▼ CPR Performed Not Performed ▼ Destination Not Applicable Abdominal Ultrasound Not Performed ▼ CT Head Not Performed ▼ Aortogram Not Applicable -CT Cervical Not Performed ▼ Add Referring Hospital Indiana Patient Registry Cal Intranet | Protected Mode: Off

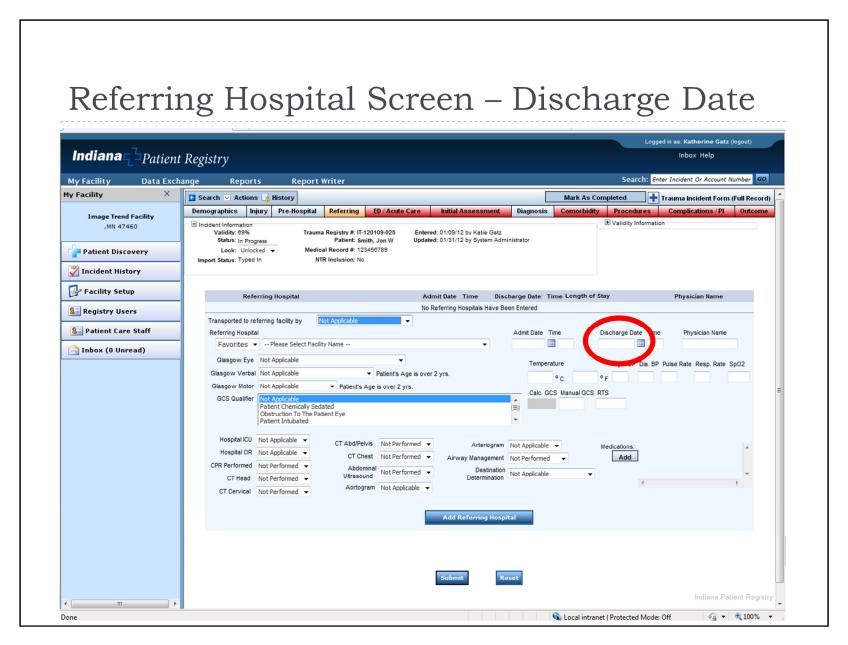
The "Referring Hospital" element is the name of the referring hospital. Select an option from the drop-down menu.



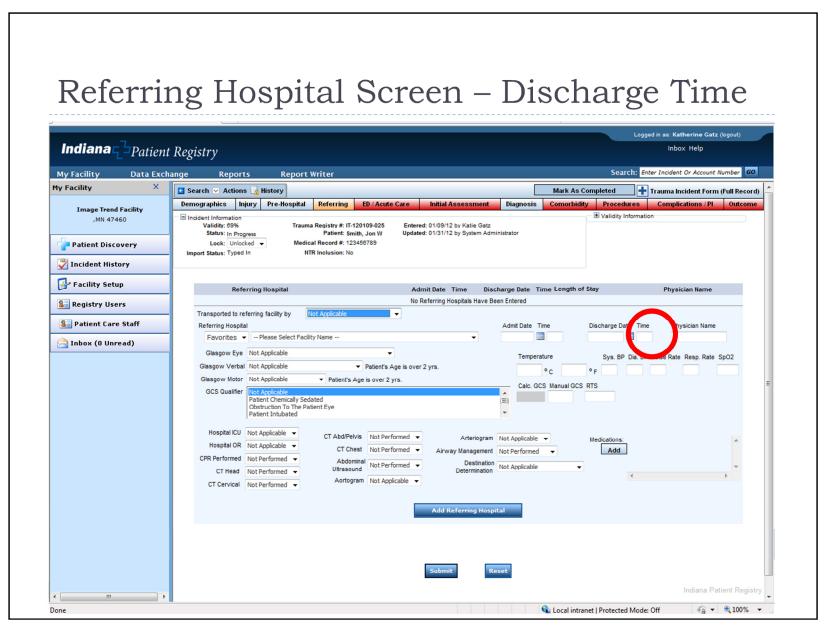
The "Admit Date" element is the date the patient arrived at the referring hospital. If you would prefer not to type in the date, click on the calendar icon and select a date.



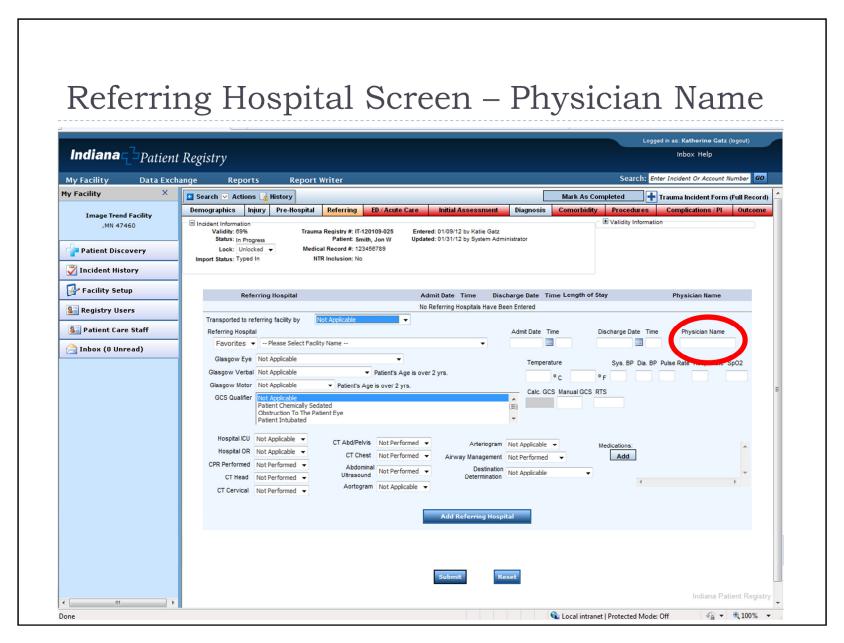
The "Time" element is the time the patient arrived at the referring hospital.



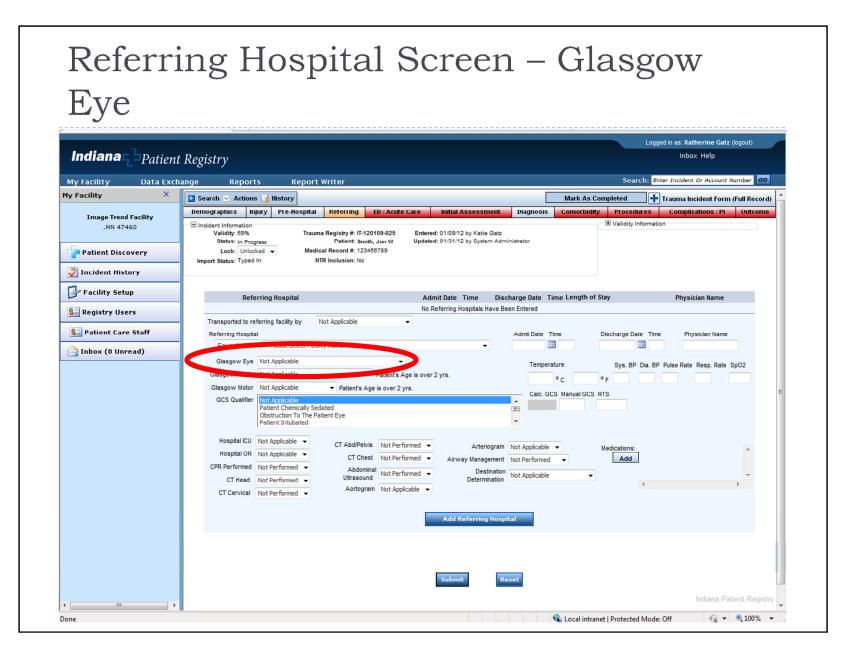
The "Discharge Date" element is the date the patient was discharged from the referring hospital. If you would prefer not to type in the date, click on the calendar icon and select a date.



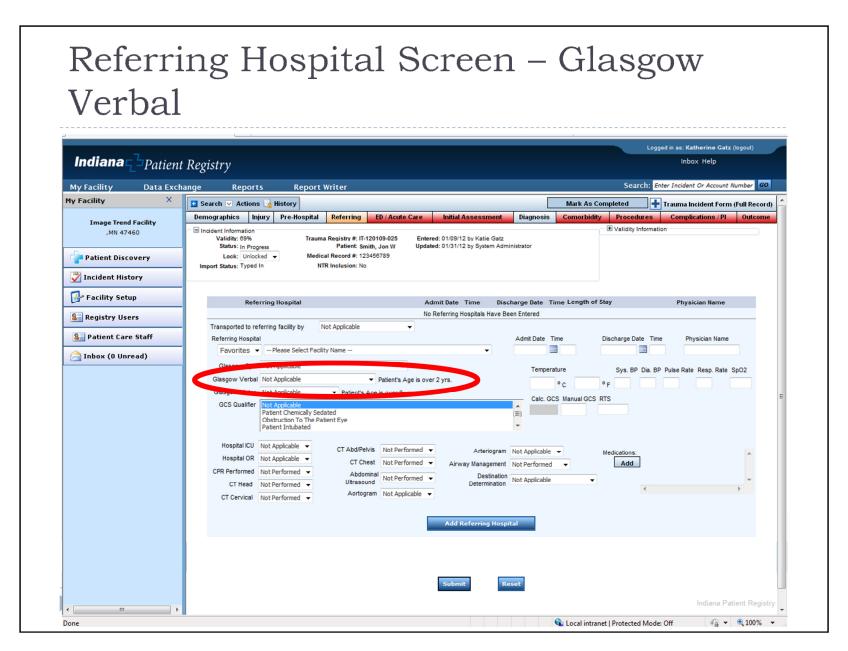
The "Time" element is the time the patient was discharged from the referring hospital.



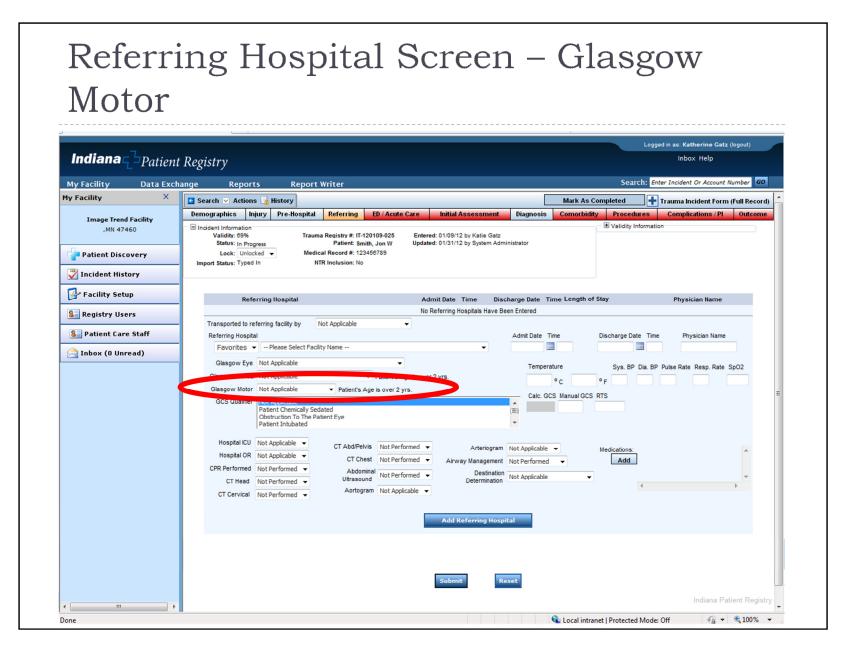
The "Physician Name" element is the name of the patient's referring physician.



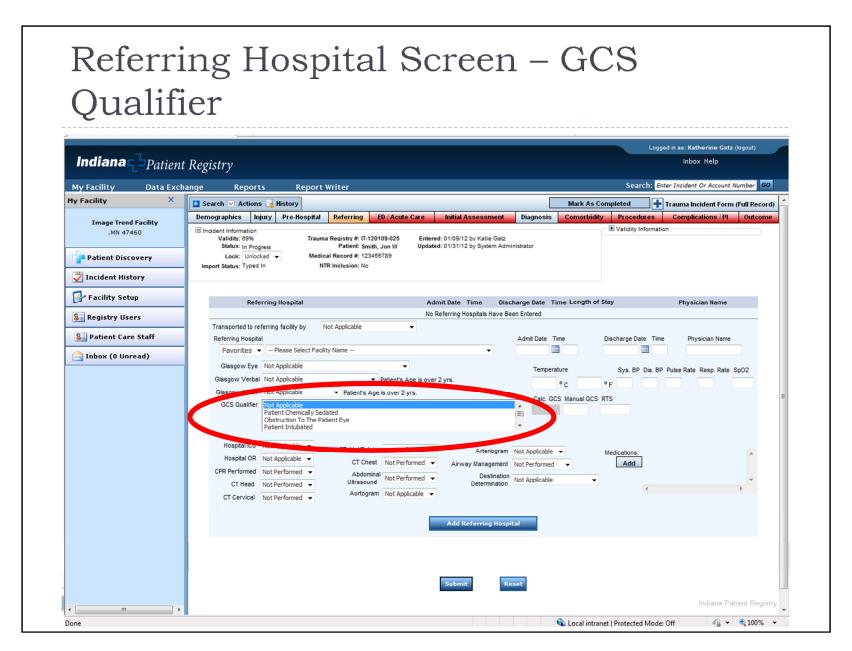
The "Glasgow Eye" element is the first recorded Glasgow Coma Score for the eye at the referring hospital. This value is used to calculate the overall GCS score for the Referring Hospital. Select an option from the drop-down menu.



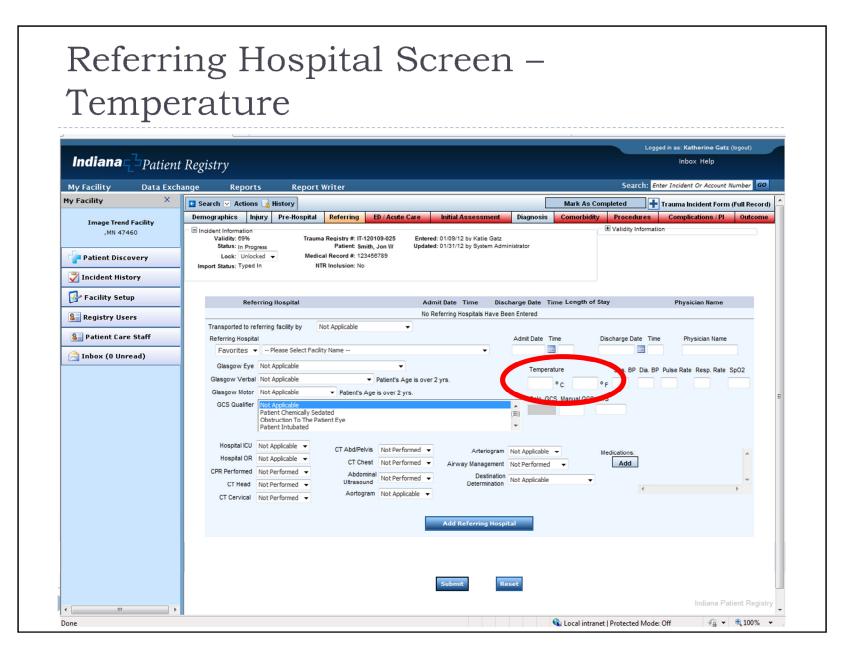
The "Glasgow Verbal" element is the first recorded Glasgow Coma Score for verbal at the referring hospital. This value is used to calculate the overall GCS score for the Referring Hospital. Select an option from the drop-down menu.



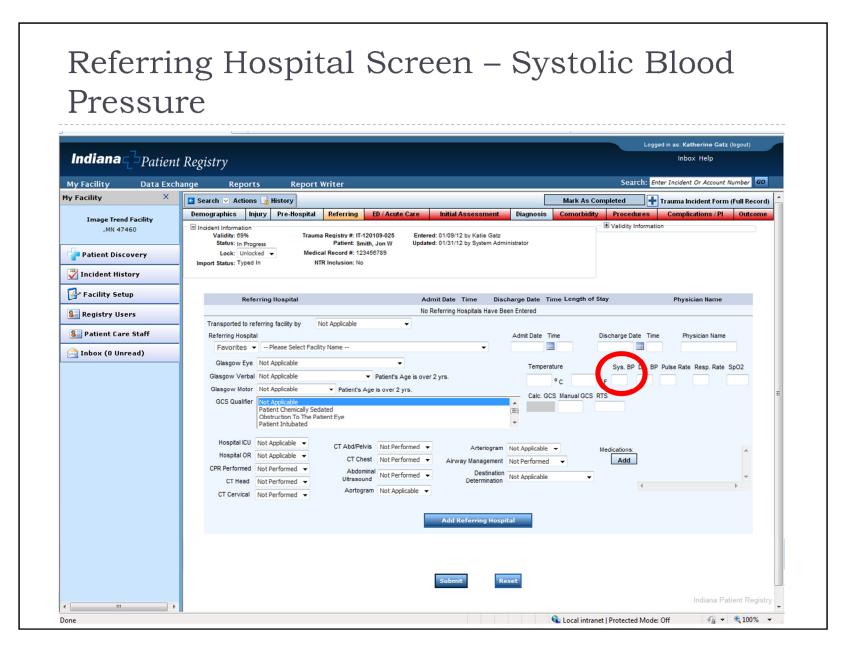
The "Glasgow Motor" element is the first recorded Glasgow Coma Score for motor at the referring hospital. This value is used to calculate the overall GCS score for the Referring Hospital. Select an option from the drop-down menu.



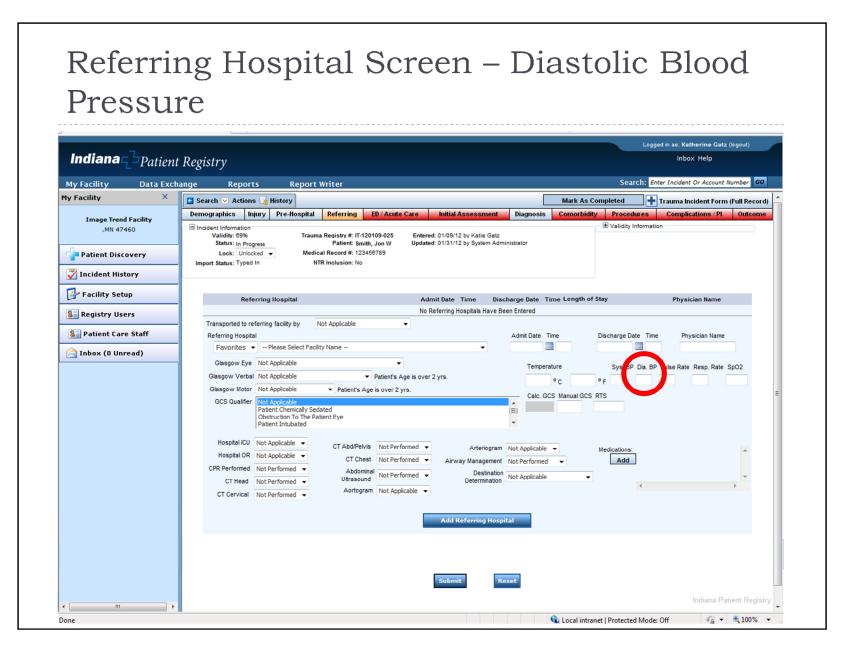
The "GCS Qualifier" element is the documentation of factors potentially affecting the first assessment of GCS at the referring hospital. Select multiple qualifiers (up to three) by holding down the 'Shift' key.



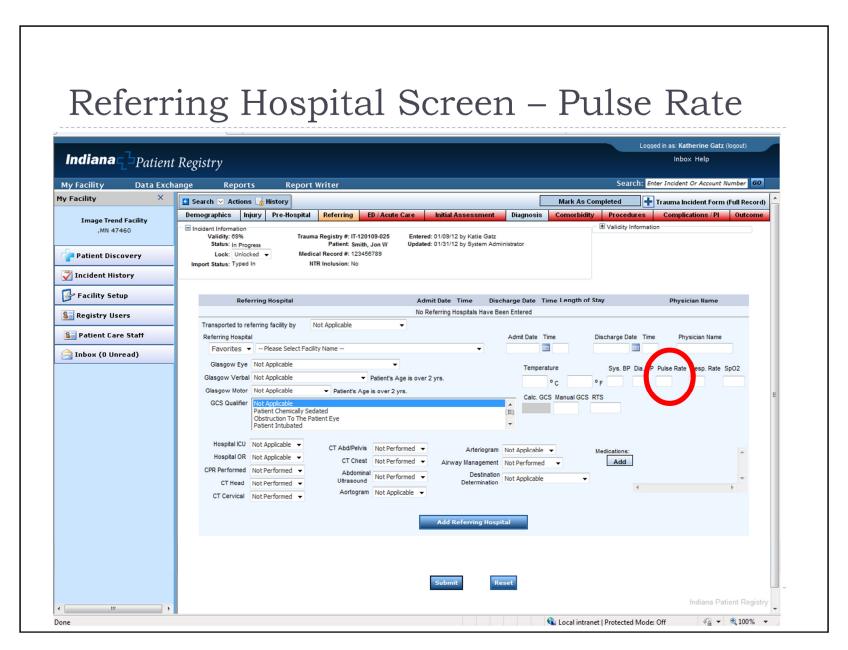
The "Temperature" element is the first recorded temperature (in degrees Celsius or Fahrenheit) at the referring hospital. Enter Celsius or Fahrenheit and it will auto-generate the Fahrenheit or Celsius, respectively.



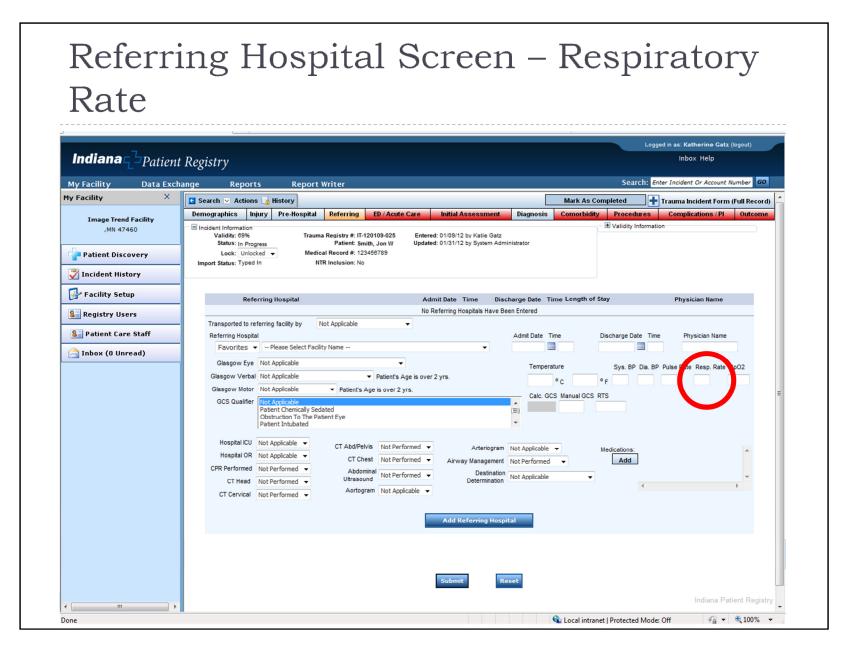
The "Sys. BP" element is the first recorded systolic blood pressure at the referring hospital. It is used to auto-calculate the Revised Trauma Score for the referring hospital.



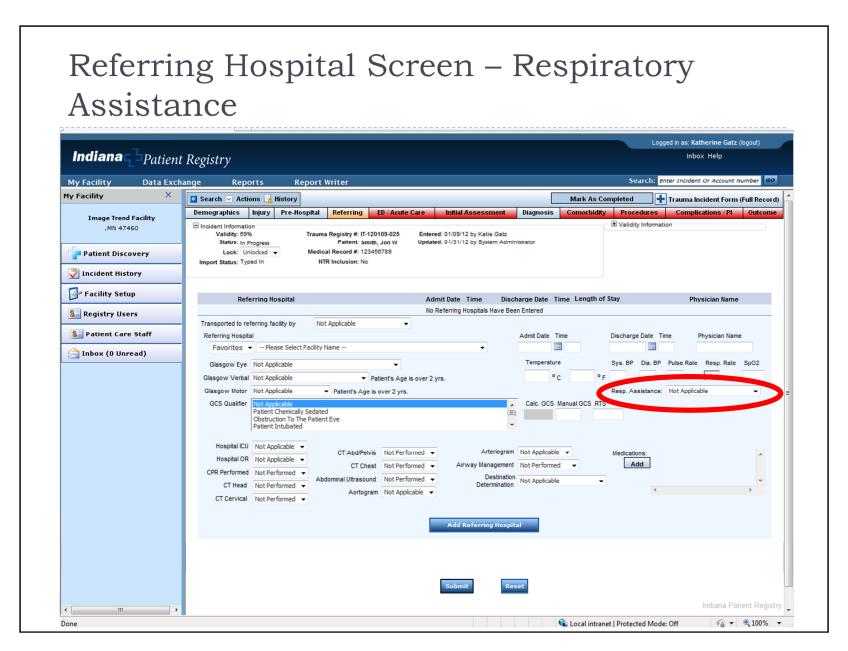
The "Dia. BP" element is the first recorded diastolic blood pressure at the referring hospital.



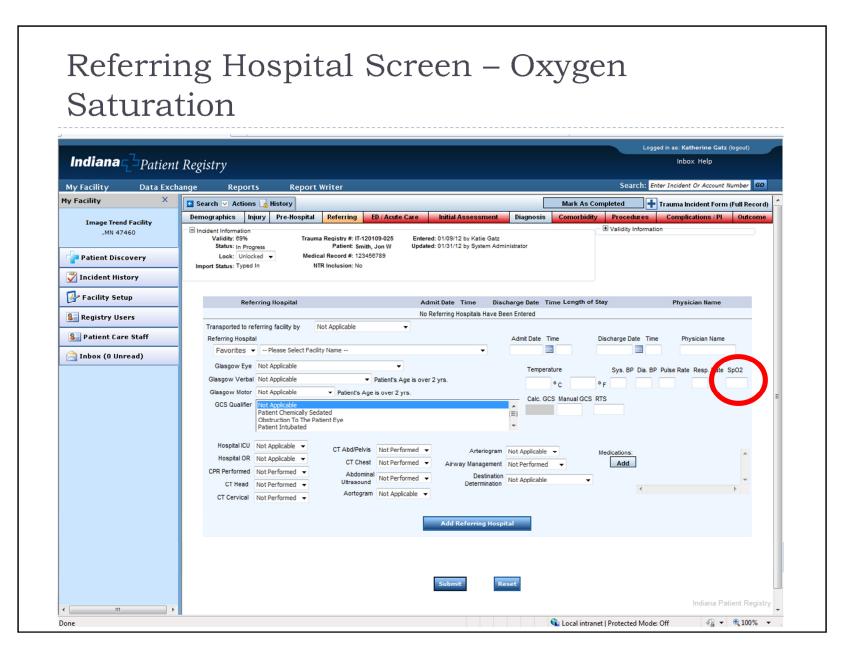
The "Pulse Rate" element is the first recorded pulse rate at the referring hospital, expressed as a number per minute.



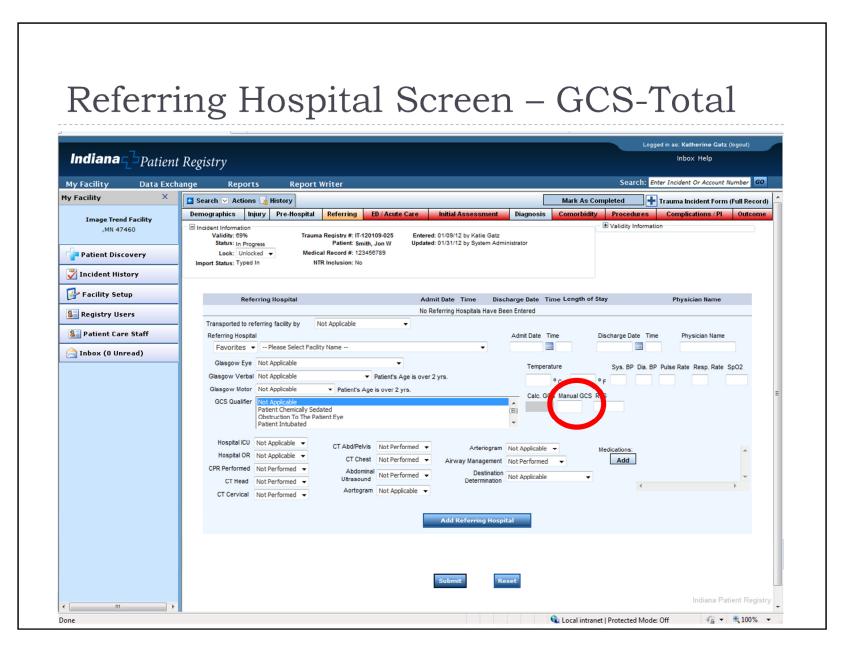
The "Resp. Rate" element is the first recorded respiratory rate at the referring hospital, expressed as a number per minute. It is used to auto-calculate the Revised Trauma Score for the referring hospital.



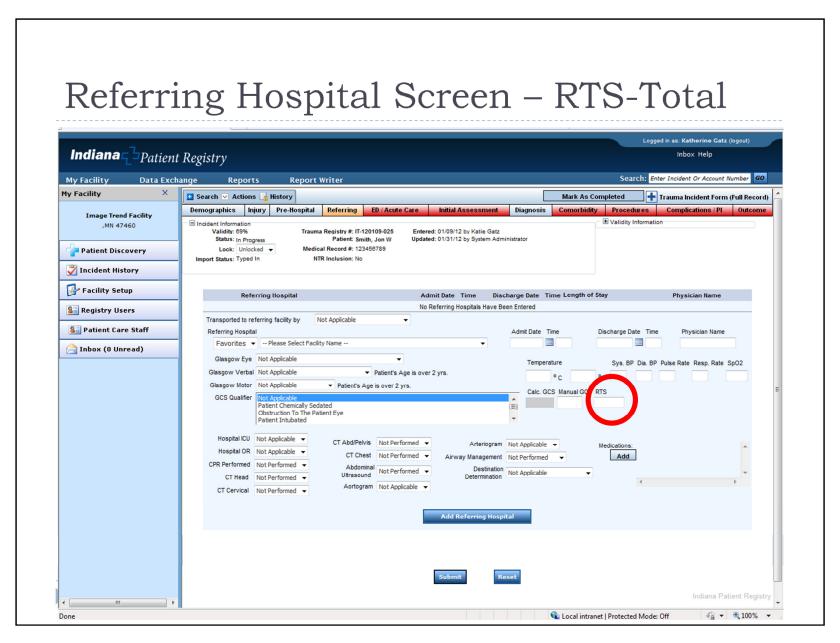
If a Respiratory Rate value is entered in the "Resp. Rate" element, a new data element will appear on the form that will allow the user to select the determination of respiratory assistance. The "Resp. Assistance" element is a determination of the mechanical and/or external support of respiration. Select an option from the drop-down menu.



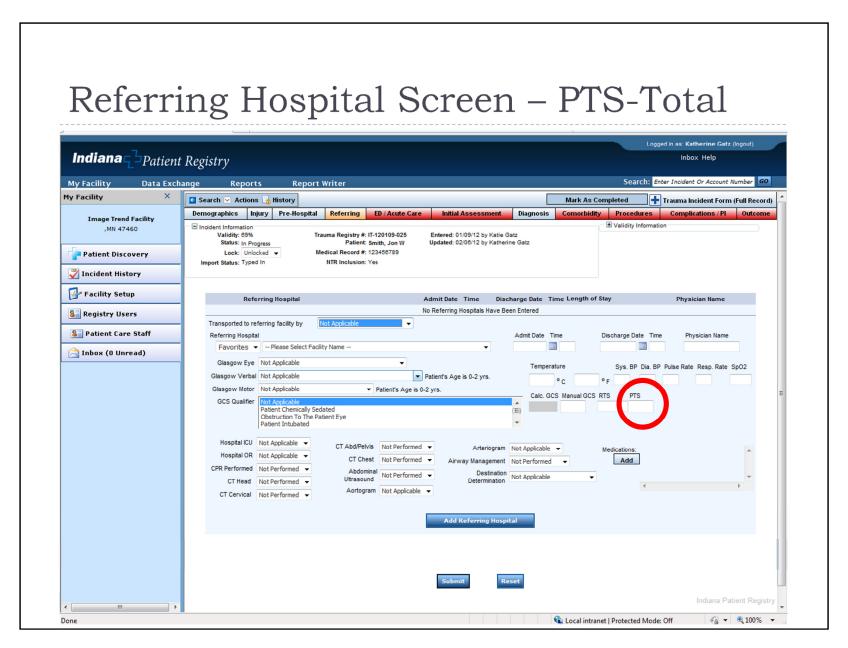
The "SpO2" element is the first recorded oxygen saturation at the referring hospital.



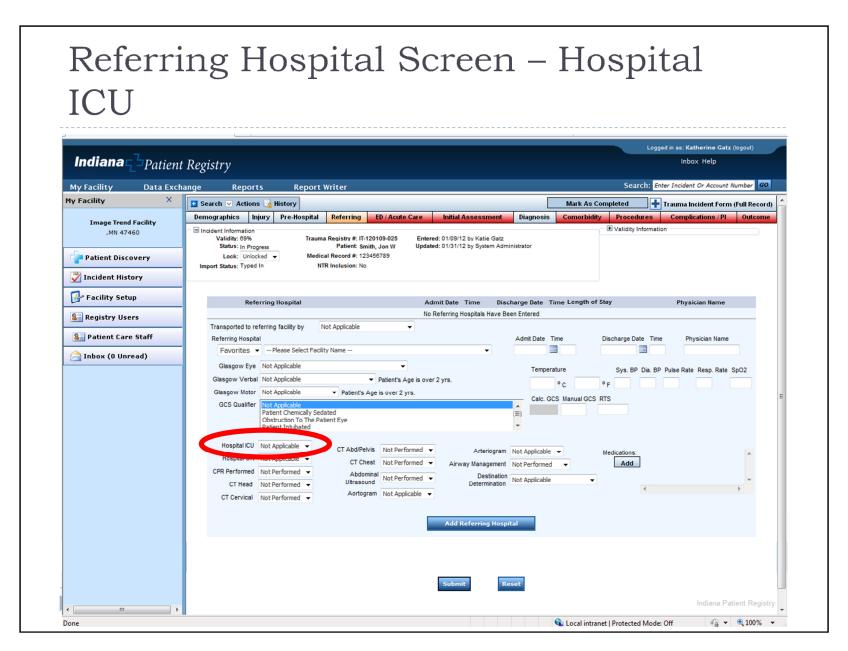
The "Manual GCS" element is the first recorded Glasgow Coma score (total) at the referring hospital. Utilize this field only if the total score is available but the component scores are not. The GCS is used to auto-generate an additional calculated field: Revised Trauma Score – Referring (adult & pediatric).



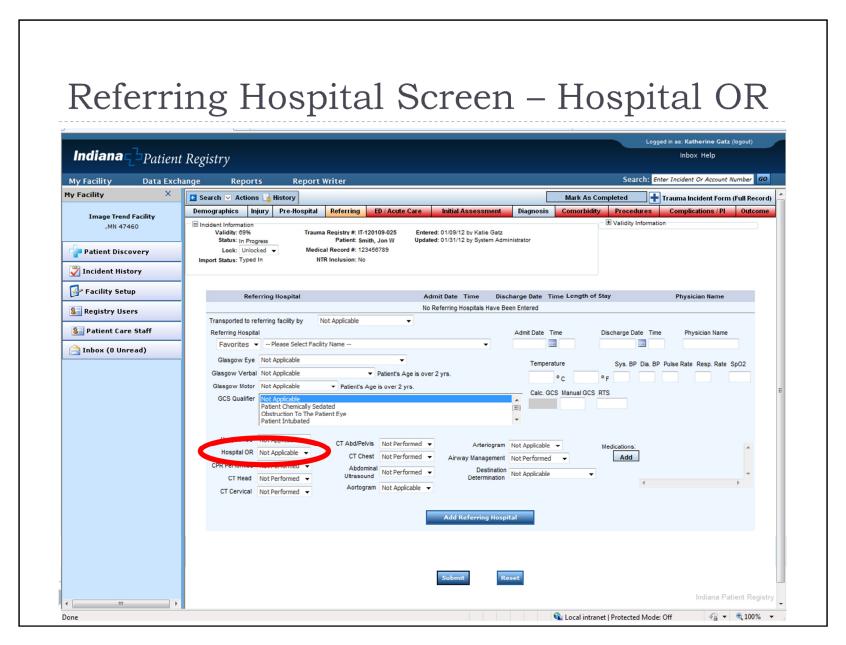
The "RTS" element is the Revised Trauma Score and is auto-generated (adult).



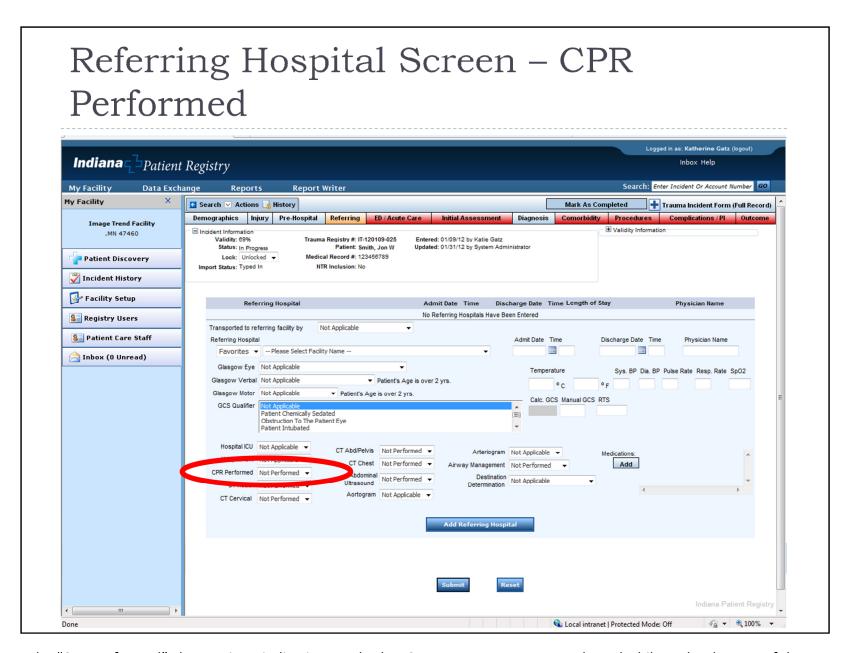
The "PTS" element is the Pediatric Trauma Score and is auto-generated. This element only appears if the patient's age is 0-2 years old.



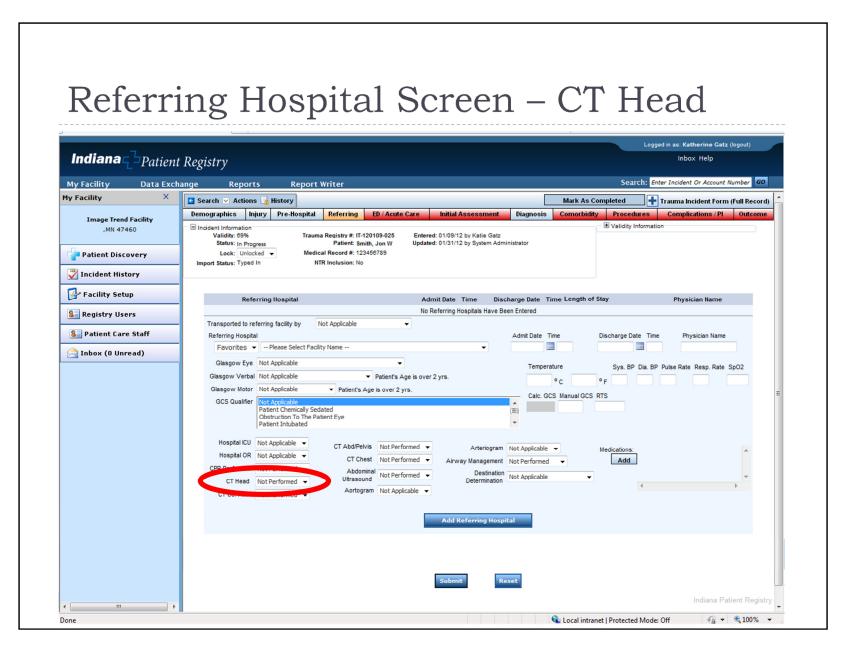
The "Hospital ICU" element is a determination of whether or not the patient went to the ICU at the referring hospital. Select from a drop-down menu.



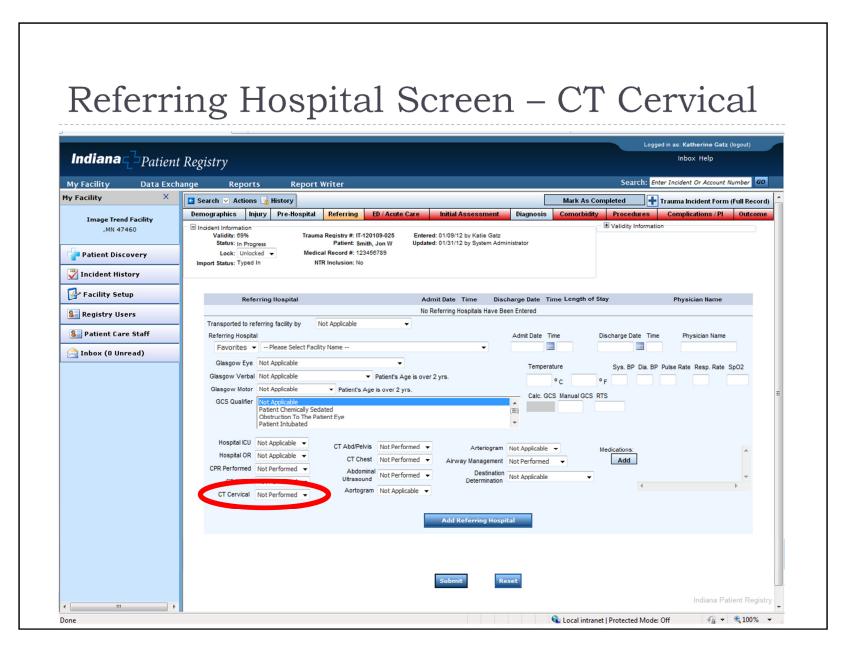
The "Hospital OR" element is a determination of whether or not the patient went to the OR at the referring hospital. Select from a drop-down menu.



The "CPR Performed" element is an indication as whether CPR management was conducted while under the care of the referring hospital. Select an option from the drop-down menu.



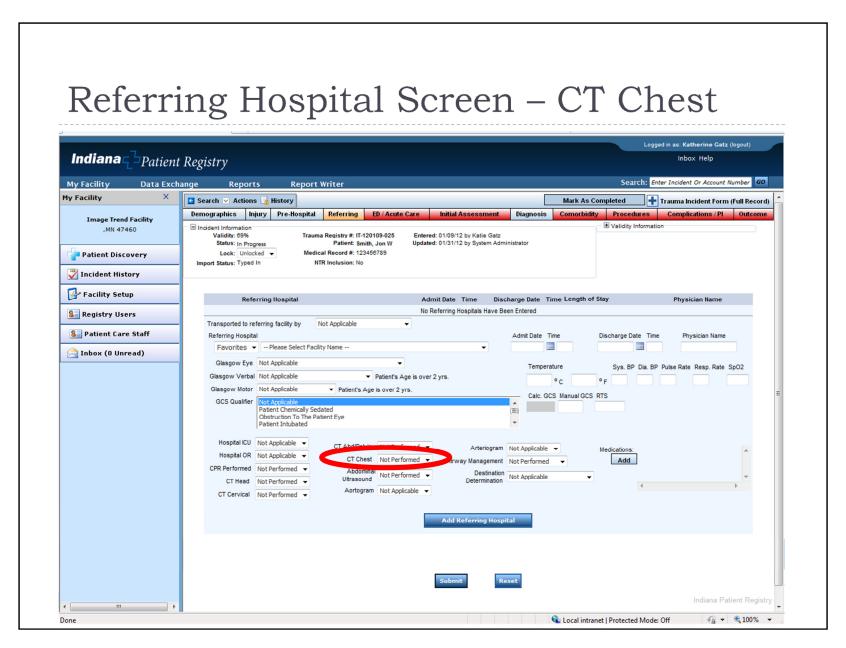
The "CT Head" element is an indication as to if this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



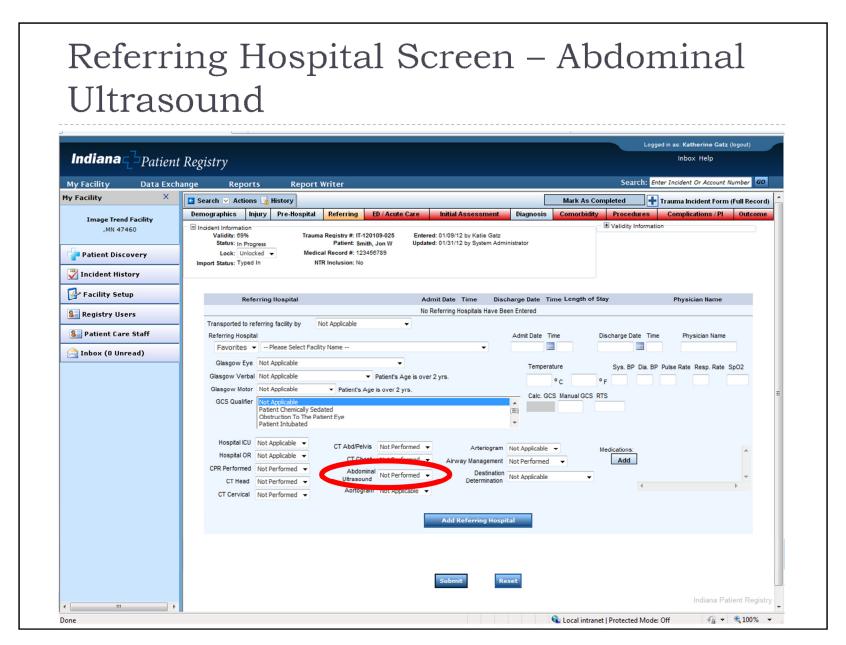
The "CT Cervical" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.

Referring Hospital Screen – CT Abdominal / Pelvis Logged in as: Katherine Gatz (logout Indiana Patient Registry Inbox Help Search: Enter Incident Or Account Number My Facility Reports **Report Writer** My Facility Search ✓ Actions History Mark As Completed Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Diagnosis Comorbidity Procedures Complications / PI Outcome **Image Trend Facility** ■ Validity Information ,MN 47460 Incident Information Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Validity: 69% Status: In Progress Patient: Smith, Jon W Updated: 01/31/12 by System Administrator Lock: Unlocked ▼ Medical Record #: 123456789 Patient Discovery Import Status: Typed In NTR Inclusion: No Incident History 好 Facility Setup Discharge Date Time Length of Stay No Referring Hospitals Have Been Entered & Registry Users Transported to referring facility by Sample Patient Care Staff Admit Date Time Discharge Date Time Physician Name Favorites ▼ -- Please Select Facility Name --🗎 Inbox (0 Unread) Glasgow Eve Not Applicable Temperature Sys. BP Dia. BP Pulse Rate Resp. Rate Sp02 Glasgow Verbal Not Applicable ▼ Patient's Age is over 2 yrs. Glasgow Motor Not Applicable ▼ Patient's Age is over 2 yrs. Calc GCS Manual GCS RTS GCS Qualifier Patient Chemically Sedated Obstruction To The Patient Eye Patient Intubated Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable 🕶 Medications: Hospital OR Not Applicable ▼ Add Airway Management Not Performed CPR Performed Not Performed ▼ Destination Not Applicable Abdominal Ultrasound Not Performed ▼ CT Head Not Performed ▼ Determination Aortogram Not Applicable CT Cervical Not Performed ▼ Add Referring Hospital Indiana Patient Registry な Local intranet | Protected Mode: Off √a ▼ □ 100% ▼

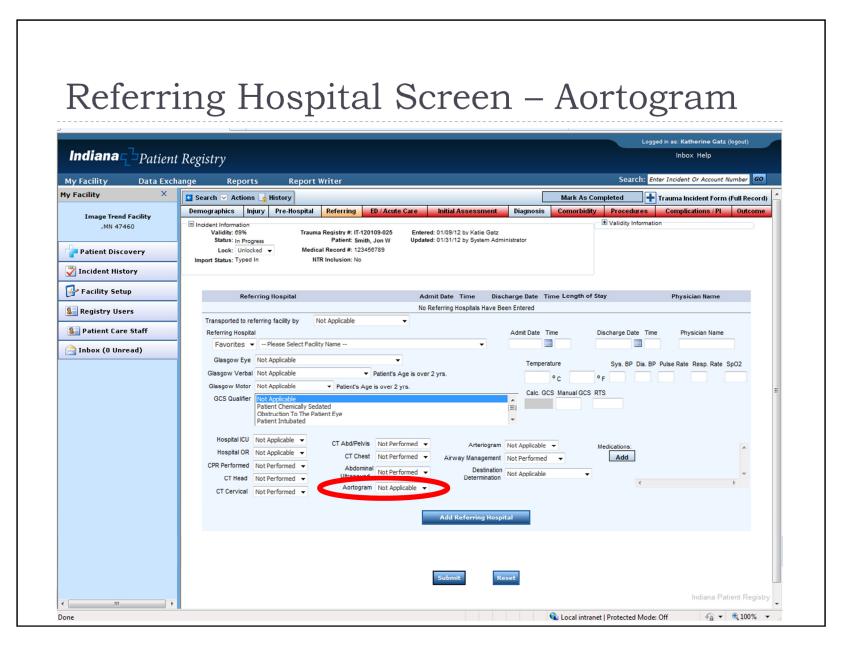
The "CT Abd/Pelvis" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



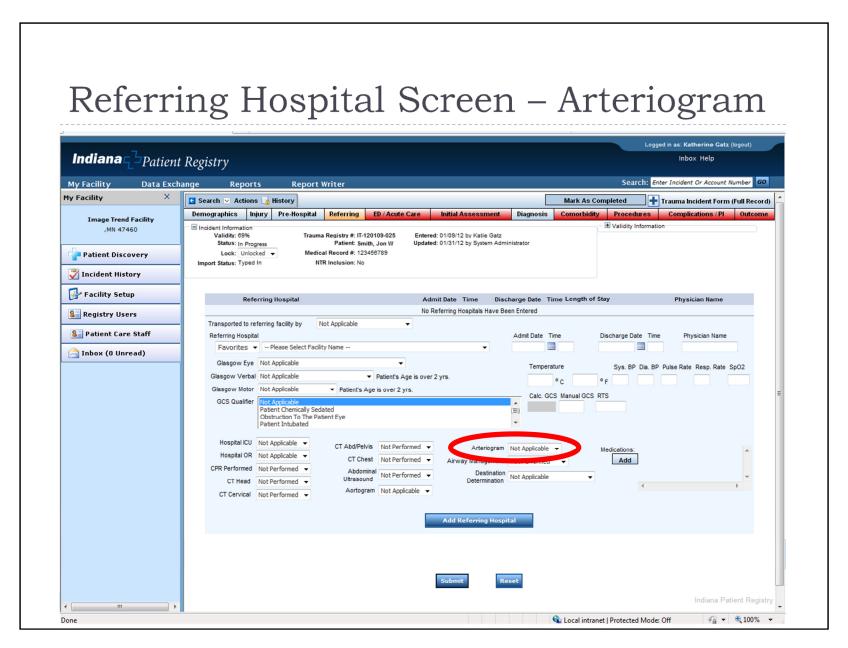
The "CT Chest" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



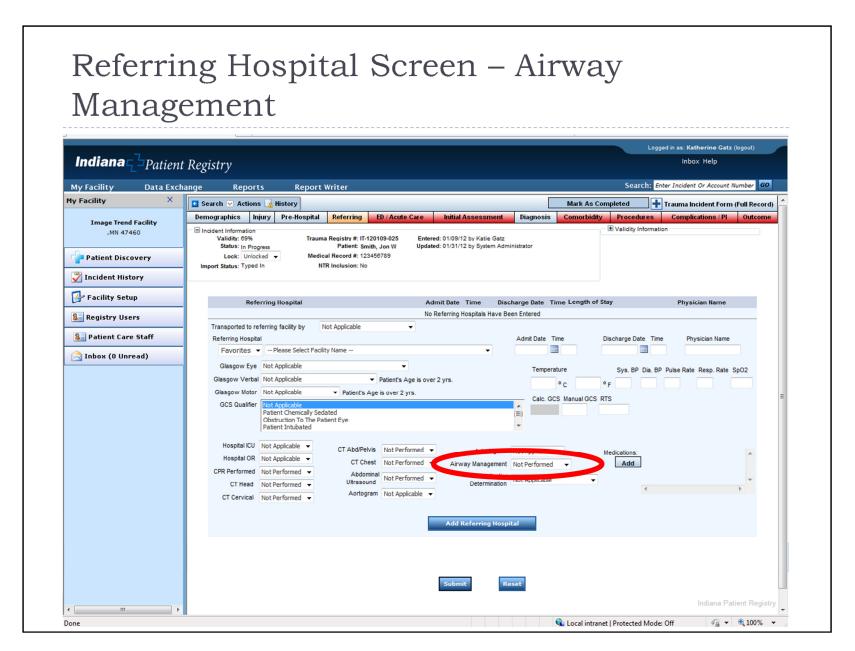
The "Abdominal Ultrasound" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



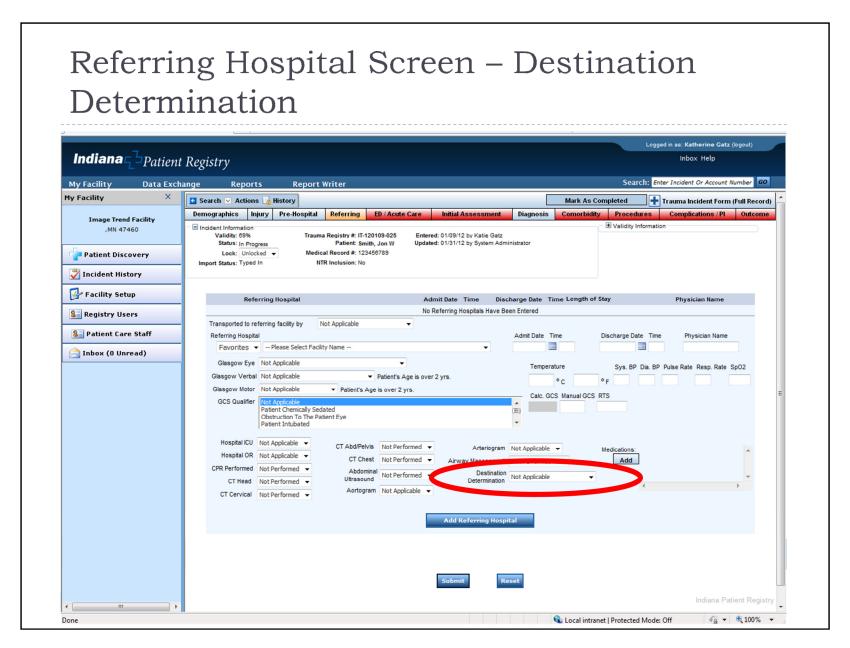
The "Aortogram" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



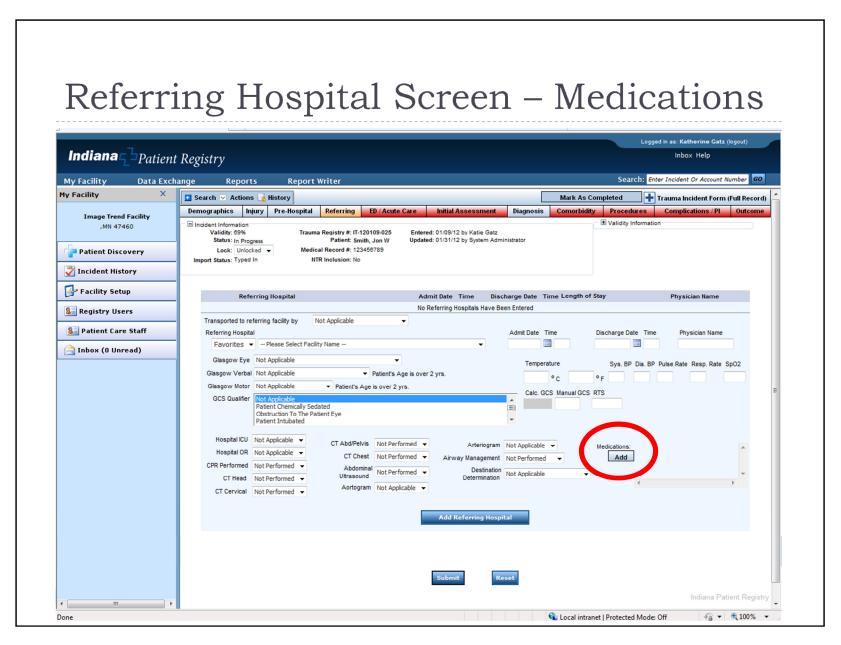
The "Arteriogram" element is an indication whether this procedure was performed while under the care of the referring hospital. Select an option from the drop-down menu.



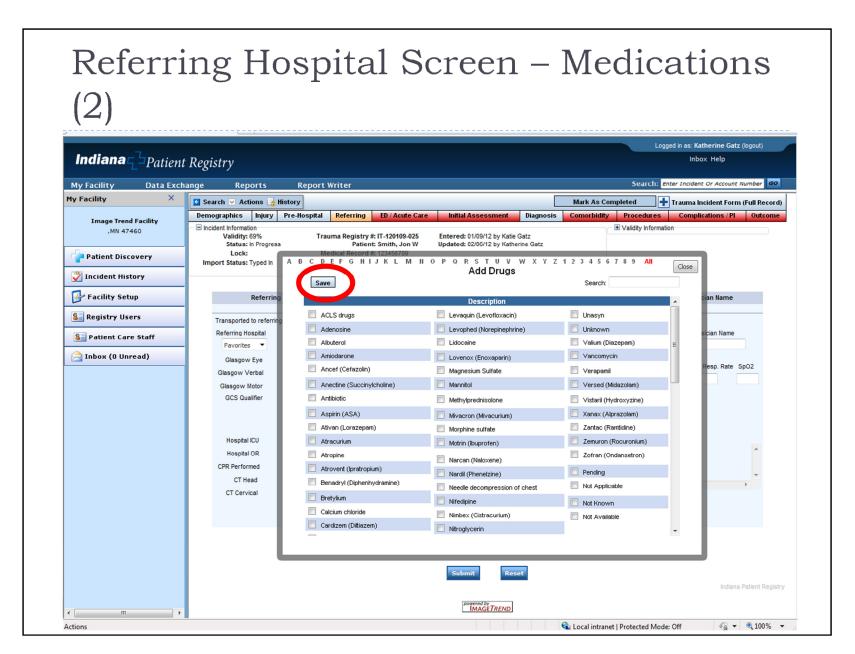
The "Airway Management" element is an indication whether a device or procedure was used to prevent or correct an obstructed airway passage while under the care of the referring hospital. Select an option from the drop-down menu.



The "Destination Determination" element is the reason the facility transferred this patient to another acute care hospital. Select an option from the drop-down menu.



The "Add Medications" element indicates which, if any, medications were administered to the patient while under the care of the referring hospital.



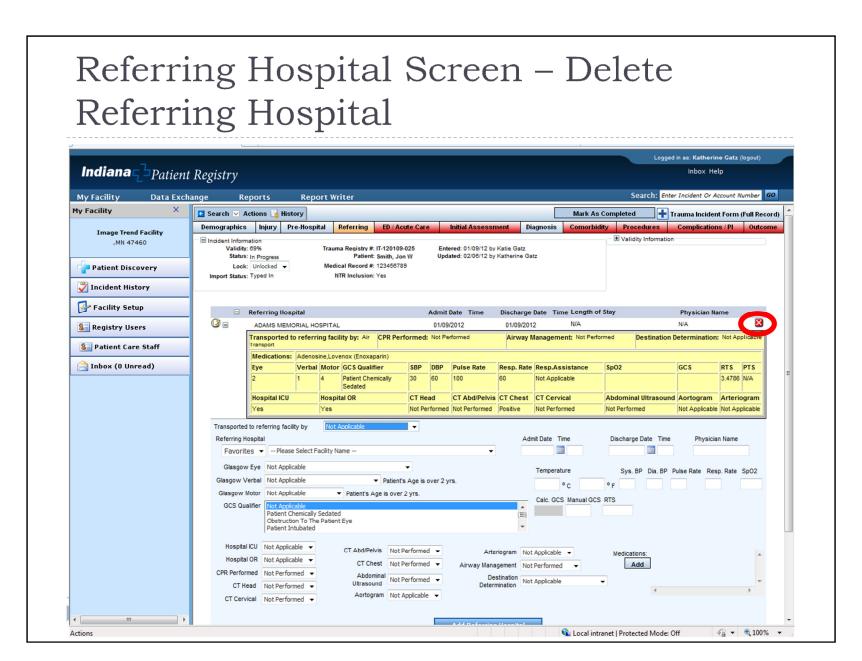
The "Add Medications" element indicates which, if any, medications were administered to the patient while under the care of the referring hospital. When you click on the "Add Medications" button, it pulls up a list of medications to choose from. You can select multiple boxes that apply to the patient. When you are done selecting medications, click the "Save" button to return to the main Referring Hospital Screen.

Referring Hospital Screen - Add Referring Hospital Logged in as: Katherine Gatz (logout Indiana Patient Registry Inbox Help Search: Enter Incident Or Account Number My Facility Reports **Report Writer** My Facility Search Actions History Mark As Completed Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Diagnosis Comorbidity Procedures **Image Trend Facility** ■ Validity Information ,MN 47460 Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Validity: 69% Status: In Progress Patient: Smith, Jon W Updated: 01/31/12 by System Administrator Lock: Unlocked ▼ Medical Record #: 123456789 Patient Discovery Import Status: Typed In NTR Inclusion: No 📝 Incident History Facility Setup Admit Date Time Discharge Date Time Length of Stay No Referring Hospitals Have Been Entered & Registry Users Transported to referring facility by 2 Patient Care Staff Admit Date Time Discharge Date Time Physician Name Favorites ▼ -- Please Select Facility Name --🗎 Inbox (0 Unread) Glasgow Eve Not Applicable Sys. BP Dia. BP Pulse Rate Resp. Rate SpO2 Glasgow Verbal Not Applicable ▼ Patient's Age is over 2 vrs. Glasgow Motor Not Applicable ▼ Patient's Age is over 2 yrs. Calc GCS Manual GCS RTS Patient Chemically Sedated Obstruction To The Patient Eye Patient Intubated Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable -Medications: Hospital OR Not Applicable ▼ CT Chest Not Performed ▼ Add Airway Management Not Performed ▼ CPR Performed Not Performed ▼ Abdominal Ultrasound Not Performed ▼ Not Applicable CT Head Not Performed ▼ Aortogram Not Applicable ▼ CT Cervical Not Performed ▼ Indiana Patient Registry Local intranet | Protected Mode: Off √a ▼ □ 100% ▼

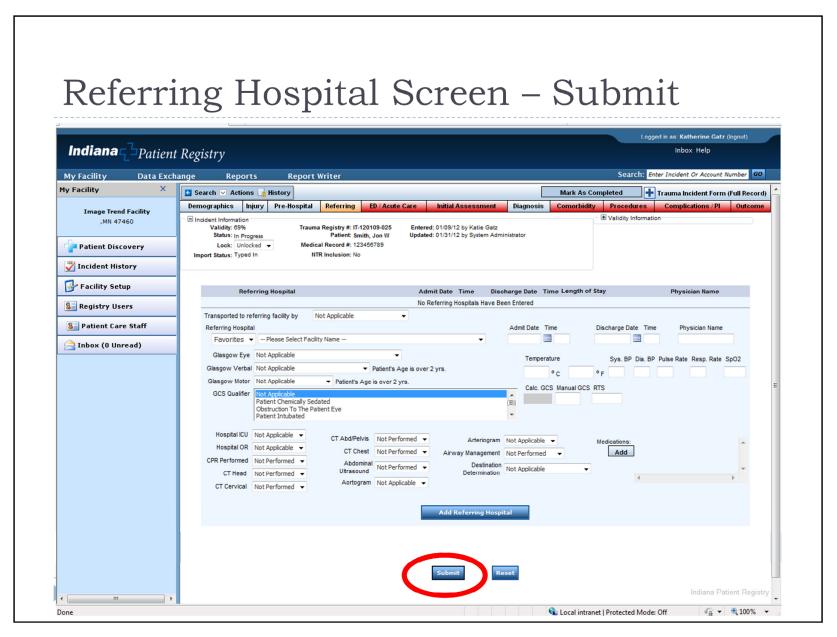
Once you have entered all available information, in order to save the changes you made, click the "Add Referring Hospital" button.

Referring Hospital Screen - Add Referring Hospital (2) Logged in as: Katherine Gatz (logout Indiana Patient Registry Inbox Help Enter Incident Or Account Number My Facility Report Writer My Facility 🔼 Search 🗹 Actions 🔓 History Trauma Incident Form (Full Record) Demographics Injury Pre-Hospital Referring ED / Acute Care Initial Assessment Diagnosis Comorbidity Procedures Complications / PI Outcome **Image Trend Facility** MN 47460 Validity: 69% Trauma Registry #: IT-120109-025 Entered: 01/09/12 by Katie Gatz Status: In Progress Patient: Smith, Jon W Updated: 02/06/12 by Katherine Gatz Medical Record #: 123456789 Lock: Unlocked ▼ Patient Discovery NTR Inclusion: Yes Incident History 🐶 Facility Setup Discharge Date Time Length of Stay Admit Date Time N/A N/A ADAMS MEMORIAL HOSPITAL 01/09/2012 01/09/2012 & Registry Users Transported to referring facility by: Air CPR Performed: Not Performed Destination Determination: Not Applicable Sample Patient Care Staff Medications: Adenosine Lovenox (Enoxaparin) 🗎 Inbox (O Unread) Verbal Motor GCS Qualifier SBP DBP Pulse Rate Resp. Rate Resp.Assistance RTS PTS Patient Chemically 3.4786 N/A Sedated Hospital ICU CT Abd/Pelvis CT Chest CT Cervical Abdominal Ultrasound Aortogram Arteriogram Not Performed Not Performed Positive Not Performed Transported to referring facility by Referring Hospital Admit Date Time Favorites ▼ -- Please Select Facility Name --Glasgow Eye Not Applicable Temperature Sys. BP Dia. BP Pulse Rate Resp. Rate SpO2 Glasgow Verbal Not Applicable ▼ Patient's Age is over 2 yrs. Glasgow Motor Not Applicable ▼ Patient's Age is over 2 yrs. Calc. GCS Manual GCS RTS GCS Qualifier Patient Chemically Sedated Obstruction To The Patient Eye Patient Intubated Hospital ICU Not Applicable ▼ CT Abd/Pelvis Not Performed ▼ Arteriogram Not Applicable ▼ Medications: Hospital OR Not Applicable ▼ CT Chest Not Performed ▼ Add Airway Management Not Performed ▼ CPR Performed Not Performed ▼ Abdominal Destination Not Performed ▼ Not Applicable Ultrasound Aortogram Not Applicable ▼ CT Cervical Not Performed ▼ Local intranet | Protected Mode: Off

Once you click the "Add Referring Hospital" button, the screen will refresh and a yellow box will appear. To make changes to any of the information just entered, click the clipboard and pencil icon on the left-hand side of the screen. You can also add additional referring hospitals if need be. Return to the beginning of this presentation to follow the steps to add an additional referring hospital.



You can delete Referring Hospital Information by clicking on the red X Icon on the right-hand side of the screen.



Click the "Submit" button to save the information just entered and to continue to the next tab.